PTO/SB/08 (08-03)
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| ۳   | Unice: the Paper   | WORK REDUCTION AC                         | 10 1995,                 | no persons are n                            | equired to respon | dtoac  | collection of tr | dormællen uni                                    | ess II disp                             | ays a valid OMB            | control number                                   |
|---|--|---|--------------------------|---|-------------------|--------|------------------|--|---|----------------------------|--|
| L   |  | ATENT APPL                                |                          | Itute for Form                              | ON R              | RECORD |                  |  | Application or Docket Number 09 778 874 |                            |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                          |   |                   |        | SMALL ENTITY     |  |   | OTHER THAN<br>SMALL ENTITY |  |
|   | FOR<br>USIC FEE  | NUM                                       | IMBER FILED NUMBER EXTRA |   |                   | J L    | RATE             | FEE  |   | RATE                       | FEE  |
| Ö   | CFR 1.16(s))   |   |                          |   |                   |        |                  |  | OR                                      |                            | ,  |
|   | TAL CLAIMS<br>CFR 1.18(c))   |   | eunim                    | 20 • •                                      |                   | 1 Г,   | K \$ =           |  | OR                                      | X 5 =                      | T  |
|   | DEPENDENT CL<br>CFR 1.15(b))   | AMS                                       | สน่าบร                   | 3   |                   | 1 1,   |                  | <u> </u>   | 1                                       | X S                        | <del> </del>                                     |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))   |  |   |                          |   |                   | 1      |                  |  | OR                                      | <del>  ``</del>            | <del>                                     </del> |
|   |  |   |                          |   |                   |        | * * *            | <del>                                     </del> | OR                                      | <u> </u>                   |  |
| * If the difference in column 1 is less than zero, anter *0* in column 2.   |  |   |                          |   |                   |        | TOTAL            | <u> </u>   | OR                                      | TOTAL                      |  |
|   | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |   |                          |   |                   |        | SMALL E          | -NTITY   | OR                                      | OTHER                      | RTHAN  |
| ENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  |        | RATE             | ADDI-<br>TIONAL<br>FEE                           |   | RATE                       | ADDI-<br>TIONAL                                  |
|   | Total<br>(37 CFA 1.18(4))  | 15  | Minus                    | 21  |                   |        | 1 2              | PEE  | OR                                      | X 3 =                      | FEE  |
| S   | Independent<br>(37 CFR 1, 18(b))   | 11  | Minus                    | "" /  | •                 | ×      |                  |  | OR                                      | X 8 .                      | . /  |
| AM  | FIRST PRESENTATION OF MAILTIPLE DEPENDENT CLASS (37 CFR 1.18(d))   |   |                          |   |                   |        |                  |  |   |                            | <del>-/-</del>                                   |
|   | ,  |   |                          |   |                   | T      | OTAL             |  | OR                                      | TOTAL                      |  |
|   |  |   |                          |   |                   | A      | DOJE REE         |  | OR                                      | AOD1 FEE                   |  |
|   |  | (Column 1)<br>CLAIMS                      |                          | (Column 2)                                  | (Column 3)        |        | <del></del>      |  | 1                                       | <del>,</del>               |  |
| MENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                          | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA  |        | RATE             | ADDI-<br>TIONAL<br>FEE                           |   | RATE                       | ADDI-<br>TIONAL<br>FEE                           |
|   | Correction Logical Control Con | 1. /5                                     | Minus                    | <u> </u>                                    | ./                |        | •                | <u>:</u>   | OR                                      | ,                          |  |
| WENO  | (37 CFR s.SSD))  | . /                                       | Minus                    | " 3   |                   | ×      |                  |  | OR ·                                    | X 1 =                      |  |
| ⋛   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |   |                          |   |                   | 1      |                  |  | OR:                                     |                            |  |
|   |  |   |                          |   |                   |        | TAL              |  |   | TOTAL                      |  |
|   |  |   |                          |   | AD                | OL FEE |                  | OR   | ADDITEE [                               |                            |  |
|   |  | (Column 1)<br>CLAIMS                      |                          | (Column 2)<br>HIGHEST                       | (Column 3)        |        | <del></del> -    |  |   |                            |  |
|   |  | REMAINING<br>AFTER<br>AMENDMENT           |                          | NUMBER<br>PREVIOUSLY<br>PAID FOR ,          | PRESENT<br>EXTRA  | L      | RATE             | ADDI-<br>TIONAL<br>FEE                           |   | RATE                       | ADDI-<br>TIONAL<br>FEE                           |
|   | Total<br>profit 1.14(4)  | 12  | Minus                    | <u> </u>                                    | • /               | × s    |                  |  | OR                                      | × 5                        | ,  |
| ֓֞֝֓֞֓֞֓֓֓֞֓֓֡֓֞֜֞֜֞֓֓֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡  | independent<br>(37 CFR 1.16(k))  | . /                                       | Minus                    | - 3   | •                 | ××     | •                |  |   | × 1                        |  |
| ξ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |   |                          |   |                   | ٠,     |                  |  |   | • • •                      |  |
|   |  |   |                          | •   | TO                |        |                  | _  | TOTAL                                   |                            |  |
| * If the entry in column 1 is less than the entry in column 2 write TT in column 3  |  |   |                          |   |                   |        |                  |  |   |                            |  |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". |  |   |                          |   |                   |        |                  |  |   |                            |  |

If the Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1,16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450; Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissionar for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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